

PART B - FEE(S) TRANSMITTAL

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MAY 11 2006

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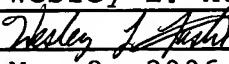
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21552 7590 03/06/2006

MADSON & AUSTIN
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15 WEST SOUTH TEMPLE
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I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

Wesley L. Austin	(Depositor's name)
	(Signature)
May 9, 2006	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/773,574	02/06/2004	Paul Hepworth	3271.2.24	6730

TITLE OF INVENTION: SYSTEMS AND METHODS FOR INTERFACING OBJECT IDENTIFIER READERS TO MULTIPLE TYPES OF APPLICATIONS

05/12/2006 WABDELR3 00000026 10773574

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE
nonprovisional	YES	\$700	\$300	\$1000
EXAMINER		ART UNIT	CLASS-SUBCLASS	
CAPUTO, LISA M		2876	235-375000	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

1 Madson & Austin

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3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE:-Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

The Code Corporation

Draper, UT

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are enclosed:

4b. Payment of Fee(s):

- Issue Fee
- Publication Fee (No small entity discount permitted)
- Advance Order - # of Copies _____

A check in the amount of the fee(s) is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 13-0763 (enclose an extra copy of this form).

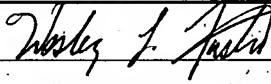
5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature



Date 5/9/2006

Typed or printed name Wesley L. Austin

Registration No. 42,273

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